

**AMENDMENTS TO THE SPECIFICATION**

Please replace the paragraph bridging page 1-2 with the following amended paragraph:

Hypercalcemia is considered to be manifested when serum calcium level exceeds 12 mg/dL, and produce disgust at the sight or thought of food, nausea and vomiting in patients with malignant tumor nonspecifically in its early stage. When hypercalcemia becomes worsened, polyuria may occur due to the decreased fluid-concentrating ability caused by distal renal tubular disorder, dehydration may ~~associates~~ occur due to the insufficient intake of water resulted from nausea or vomiting, and calcification may occur in the kidney, skin, blood vessels, lung, heart and stomach. When hypercalcemia becomes more worsened, impaired consciousness such as general ~~malise~~ malaise, ~~rethargy~~ lethargy and confusion occurs, which may eventually result in coma and cardiac arrest. Specifically, severe hypercalcemia, usually defined as 3.7 mmol/L (15 mg/dL) or above, is a medical emergency. When serum calcium is 3.7 to 4.5 mmol/L (15 to 18 mg/dL) or higher, coma and cardiac arrest can occur. (see Harrison's Text for Internal Medicine, 3427, Internal Medicine, 1081-1084, Asakura Shoten.)